PTO/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875										Appli	ess it displays a valid OMB control number  Application of Docket Number		
										/_	10/65062		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY										<b>O</b> R	OR OTHER THAN SMALL ENTITY		
Ŀ	FOR NUMBER FILED NUMBE					UMBER EXTRA	71	RATE	CCC	7			
	BASIC FEE (37 CFR 1.16(a))				7.1	IONIC	FEE	-	RATE	FEE			
Ť	TOTAL CLAIMS .(37 CFR 1.16(c))			<del></del>	<del></del>	<del> </del>	4 1	<del></del>		, OR		.\$	
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(3	7 CFR 1.16(b))	CFR 1.16(b))		minus 3				X \$ =		··OR	X \$ =		
M	ILTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						11	+s: =		OR:	+5 =	<del>                                     </del>	
- 11	If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR.		<del> </del>	
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1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))							=				· ·	
										or L	+ s =	·	
•	If the entry in co	olumn ta	s less than	the entry	in column 2, wr	ile "O" in column 3.		O.r LEE		OR	ADO'L FEE		
•••	If the "Highest h	lumber f	reviously Freeingsty.P	Paid For	IN THIS SPACE	is less than 20, er	nler 20		•				
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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Clief Information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.